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FEC FORM

STATEMENT OF ORGANIZATION

FORM 1	FORM 1 ONGANIZATION							
							Office	Jse Only
NAME OF COMMITTEE (in	full)	(Check is chan	if name nged)		ple:If typing, type he lines.	12FE4	M5	- 1
AMERIC	A, S	FUTUR	E FU	MO	PAC	1111	<u> </u>	
<u> </u>						1.1.1		
ADDRESS (number and street)		150.5	MOKE	1 1 S	E DRIV	E		
(Check if add	dress						<u>l l . l . l</u>	
is changed)		WADSN	IDRITH			DH	442	281-
				CITY		STATE		ZIP CODE
COMMITTEE'S E-MAII	L ADDRESS	S (Please provid	le only one e	-mail addr	ess)			
(Check if a	ddress	Levar	rgie li	sta	@ Wads	netic	OM	
is changed				1_1_1_			1	
COMMITTEE'S WEB I	PAGE ADDI	RESS (URL)						
		L + + + + +	1 1 1 1	+ + + + +	; ; ; ; ; ;	1111	1 1 1 1	
(Check if a is changed)			<u> </u>					1 1 1 1 1 1
2. DATE	ontini pisto na di officializzation	S. A. B. W. G. W. G. W. S. Land Street, St. Co.	Me ¥ - A Mili-Lit					
3. FEC IDENTIFICA	ATION NUM	MBER	C	gragarii . Saaftaaf .a	europara nomena Local asserta (n. 1868)			
4. IS THIS STATEM	ENT 📝	NEW (N)	OR	E	AMENDED (A)			
I certify that I have ex	amined this	Statement and	to the bes	t of my kn	owledge and belief	it is true, cor	rect and cor	mplete.
Tura au Drint Nama at	f Transcriper	1:154	Evar	nali	sta			
Type or Print Name of Signature of Treasurer	reasurer	1	2 2	19010	1			
Signature of Treasurer		Mon C	vano	llu		Date :	3	30 ZOII
NOTE: Submission of fa		•			ct the person signing	-	•	alties of 2 U.S.C. §437g.
Office Use Only				Fe To	or further information ederal Election Commis oll Free 800-424-9530 ocal 202-694-1100			C FORM 1 evised 02/2009)

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TYPE OF C	OMMITTEE Committee:						
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate							
Candidate Party Affiliation	Office on Sought: House Senate President	State					
		District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate		1 1 1 1 1 1 1					
Party Con		(Damasantia					
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.					
Political A	ction Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	onnected organization is a					
	Corporation Corporation w/o Capital Stock	Labor Organization					
	Membership Organization Trade Association	Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.						
(f) /	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fund	raising Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committee/organizations, none of which is an authorized committee of a federal candidate.						
Com	mittees Participating in Joint Fundraiser						
1.	FEC ID number C						
2.	FEC ID number C						
3.	FEC ID number C						
4.		•					

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Write or Type Committee	Name	
AMERICA'	S FUTURE FUND PAC	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundralsing Repres	entative, or Leadership PAC Sponsor
1 14 A 1 m 1 5 1 1/4	BIBENACION IIIIIIIIIIIIII	
Mailing Address	190 BOX 88	
	WADISIWO RITH I I I I I I I I	OH 44282 -
	CITY	STATE ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Re	epresentative Leadership PAC Sponsor
 Custodian of Records books and records. 	s: Identify by name, address (phone number optional) and position	of the person in possession of committee
Full Name	ISA EVANGELISTA	
Mailing Address	1150 SMOKENISE Drive	
	Wadsworth	OH 44281-
Title or Position	CITY ST	TATE ZIP CODE
Treasur	Telephone number	ir 330-336-11900
	ne and address (phone number optional) of the treasurer of the coe.g., assistant treasurer).	ommittee; and the name and address of
Full Name of Treasurer	SA EVange I I sita	
Mailing Address	150 SMOKERISE PRIVE	
		1.
	Wadswarth	04 442811-1
		TATE ZIP CODE
Title or Position	2.17	3301-3361-7900
UIT CIA SUITE	Telephone number	

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

Name of Bank, Depository, etc.

Mailing Address

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how if was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):